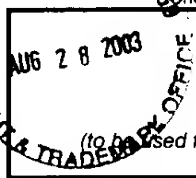


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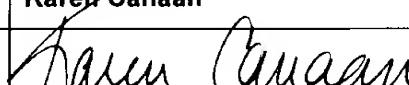
 <b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/929,818
	Filing Date	August 13, 2001
	First Named Inventor	Leland F. WILSON
	Art Unit	1654
	Examiner Name	Billy D. CHISM
	Attorney Docket Number	9050-0013.24
Mail Stop	Non-Fee Amendment	

**ENCLOSURES (Check all that apply)**

- |  |  |  |
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| <input checked="" type="checkbox"/> No fee due<br><input type="checkbox"/> Fee Transmittal<br><input type="checkbox"/> Fee(s) due<br><input type="checkbox"/> Fee Transmittal<br><input type="checkbox"/> Check for \$0<br><input checked="" type="checkbox"/> Charge any underpayment or credit any overpayment to Deposit Account No. 18-0580<br><input checked="" type="checkbox"/> Return postcard<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement & Form(s) PTO-1449<br><input type="checkbox"/> Copy(ies) of cited reference(s)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts / Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s): | <input type="checkbox"/> After Allowance Communication to a Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Response to Requirement for Restriction</b> |
|--|--|--|

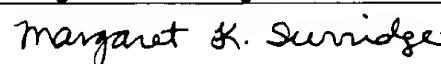
Remarks:

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Name (print/type)	Karep-Canaan	Registration No. (Attorney/Agent)	42,382	Telephone	(650) 330-0900
Signature				Date	August 25, 2003

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 25, 2003.

Name (print/type)	Margaret K. Surridge	Date	August 25, 2003
Signature			



Atty Dkt No. 9050-0013.24  
PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of:

Leland F. WILSON et al.

Confirmation No.: 9897

Serial No.: 09/929,818

Group Art Unit: 1654

Filing Date: August 13, 2001

Examiner: Billy D. CHISM

Title: TREATMENT OF FEMALE SEXUAL DYSFUNCTION WITH VASOACTIVE AGENTS, PARTICULARLY VASOACTIVE INTESTINAL POLYPEPTIDE AND AGONISTS THEREOF

**RESPONSE TO REQUIREMENT FOR RESTRICTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This communication responds to the Restriction Requirement, mailed July 25, 2003, for the patent application identified above. A previous Restriction Requirement was mailed from the Office on April 4, 2003, requiring restriction between the following sets:

**Set I:** inventions 1-204, claims 1-28, drawn to a method of treating female sexual disorders comprising administering any one of SEQ ID Nos. 2-204; and

**Set II:** inventions 205-408, claims 29-40, drawn to polypeptide compositions comprising any one of amino acid sequences of SEQ ID Nos. 205-408.


In the response filed on May 23, 2003, applicants elected Set I, with traverse. With this Restriction Requirement, the Examiner acknowledges applicants election of Set I and is requiring applicants to elect one sequence from Set I.

In response to the Examiner's request, applicants elect SEQ. ID No. 2 from Set I. This election is made with the understanding that the elected sequence is for purposes of initial search and examination and that upon allowance of a generic claim all non-elected sequences will come under consideration.

If the Examiner has any questions concerning this communication, he is encouraged to contact the undersigned attorney at (650) 330-4913.

Respectfully submitted,

By:

  
Karen Canaan  
Registration No. 42,382

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